

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. <i>10820476</i>	FILING DATE	
						APPLICANT(S)		
						CLAIMS		
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1								
2								
3								
4								
5								
6								
7	1		1					
8			1					
9								
10			1					
11				1				
12			1					
13		1		1				
14								
15								
16	1		1					
17		1		1				
18		1		1				
19		1		1				
20		1		1				
21		1		1				
22		1		1				
23		1		1				
24		1		1				
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44								
45								
46								
47								
48								
49								
50								
TOTAL IND.	2							
TOTAL DEP.	17							
TOTAL CLAIMS	19							
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								